i a i



## Attorney Docket No. 076507-0385

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants:

Baloga, Mark A.

Forslund, Carl V., III Feldpausch, Thomas G.

Title:

MOVABLE DISPLAY

SUPPORT SYSTEM

Application No.:

To Be Determined

Filing Date:

To Be Determined

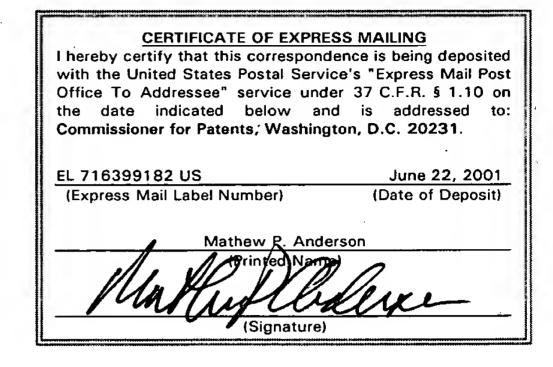
Examiner:

To Be Determined

Art Unit:

To Be Determined

Commissioner for Patents Box PATENT APPLICATION Washington, D.C. 20231



## UTILITY PATENT APPLICATION

**TRANSMITTAL** 

Transmitted herewith for filing under 37 C.F.R. § 1.53(b) is the nonprovisional utility patent application of:

Mark A. Baloga 721 Croswell Avenue East Grand Rapids, MI 49506

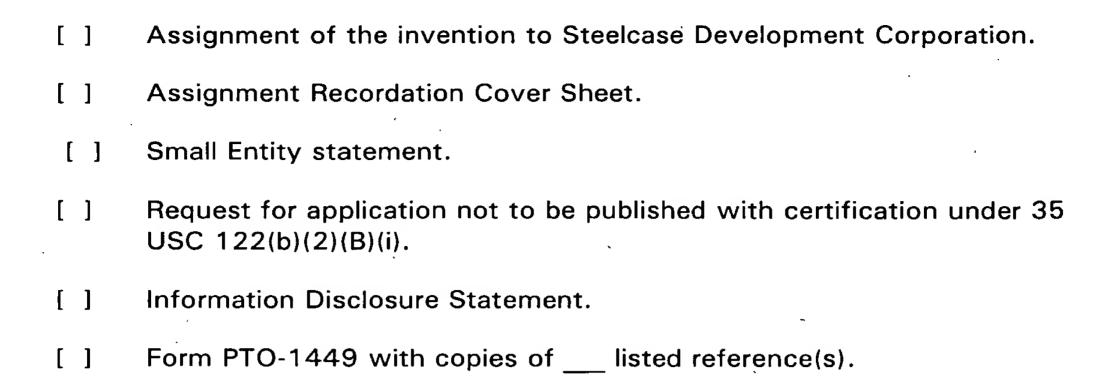
Carl V. Forslund III 2334 Englewood, S.E. East Grand Rapids, MI 49506

Thomas G. Feldpaush 1824 Center Road Hastings, MI 49058

[ ] Applicant claims small entity status under 37 CFR 1.27.

## Enclosed are:

- [X] Specification, Claim(s), and Abstract (17 pages).
- [X] Drawings (5 sheets, Figures 1-5B).
- [X] Unexecuted Declaration and Power of Attorney (4 pages).



The filing fee is calculated below:

[ ]

,	Claims	t	Included in		Extra				Fee
<u> </u>	as Filed	. <u> </u>	Basic Fee		Claims		Rate		Totals
Basic Fee							\$710.00	,	\$710.00
Total Claims:	56		20	_ =	36	х	\$18.00	=	\$648.00
Independents:	4		3	=	1	х	\$80.00	=	\$80.00
If any Multiple Dependent Claim(s) present: + \$270.00								=	\$0.00
Surcharge under 37 CFR 1.16(e) for late filing of Executed + \$130.00 Declaration and late payment of filing fee								=	\$130.00
							SUBTOTAL:	=	\$1568.00
[ ] Small Entity Fees Apply (subtract ½ of above): =									\$0.00
TOTAL FILING FEE: =								=	\$1,568.00

[ ] A check in the amount of \$0.00 to cover the filing fee is enclosed.

Application Data Sheet (37 CFR 1.76).

- [X] The required filing fees are not enclosed but will be submitted in response to the Notice to File Missing Parts of Application.
- The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 06-1447. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 06-1447.

Please direct all coaddress indicated below.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Date 6222

**FOLEY & LARDNER** 

Firstar Center

777 East Wisconsin Avenue

Milwaukee, Wisconsin 53202-5367

Telephone:

(414) 297-5550

Facsimile:

(414) 297-4900

Ву

Walter E. Zin merman Attorney for Applicant

Registration No. 40,883